

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
PM 5:16
2008 MAY 19 AM 11:17

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party
(4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political
Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name
John P. Kibbie

Political Party (if applicable)
Democrat

Office Sought
State Senate

District (if Senate or House)
4

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In 5

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

John M. Hand
SIGNATURE OF PERSON FILING REPORT

(712) 852-4808
TELEPHONE

5-16-08
DATE SIGNED

I AM FILING A May 19, 2008

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 43,717.10

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

4,915.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 48,632.10

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

26,625.98

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$

22,006.12

****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$

0.00

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$

14,089.03

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$

0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
01/03/08	ID# CK#	Steven J. Ovel 2259 Washington Ave. SE Cedar Rapids, IA 52403		\$50.00	<input type="checkbox"/>
01/03/08	ID# CK#	Michael Starceovich 6401 Kirkwood Blvd., SW Cedar Rapids, IA 52404		\$50.00	<input type="checkbox"/>
01/03/08	ID# CK#	Jeffrey Schnell 104 N. 5th St. Court Grimes, IA 50111		\$100.00	<input type="checkbox"/>
01/03/08	ID# 6077 CK# 1945	Iowa Pharmacy PAC 8515 Douglas, Suite 16 Des Moines, IA 50322		\$50.00	<input type="checkbox"/>
01/03/08	ID# 6021 CK# 2171	Credit Union PAC P.O. Box 10409 Des Moines, IA 50306		\$1,000.00	<input type="checkbox"/>
01/11/08	ID# CK#	Harold Prior 1600 Joy Loy Lane Milford, IA 51351		\$100.00	<input type="checkbox"/>
01/11/08	ID# 8519 CK# 3778	Chicago & NE Ill. Dist. Council of Carpenters 12 East Erie St. Chicago, IL 60611		\$500.00	<input type="checkbox"/>
01/11/08	ID# 6078 CK# 1690	Iowa Physical Therapy PAC 8355 University Blvd, Suite K Clive, IA 50325-1162		\$25.00	<input type="checkbox"/>
01/11/08	ID# 6146 CK# 1733	Homebuilders Association PAC 3072-104th St. Urbandale, IA 50322		\$1,000.00	<input type="checkbox"/>
01/12/08	ID# 9768 CK# 3200135	Ameristar PAC P.O. Box 363 Council Bluffs, IA 51502		\$1,000.00	<input type="checkbox"/>
SUB-TOTAL				\$ 3,875.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
01/12/08	ID# 9698 CK# 606	IAAMB PAC 4949 Westown Pkwy, Ste. 165-111 West Des Moines, IA 50266-6702		\$150.00	<input type="checkbox"/>
01/12/08	ID# 6046 CK# 4393	Justice for All PAC 218 6th Ave., Ste. 526 Des Moines, IA 50309-7366		\$250.00	<input type="checkbox"/>
01/12/08	ID# 8107 CK# 16948	Enterprise Rent-A-Car PAC 600 Corporate Park Drive St. Louis, MO 63105		\$500.00	<input type="checkbox"/>
04/07/08	ID# CK#	Herman Richter RR #1 Milford, IA 51351		\$100.00	<input type="checkbox"/>
	ID# CK#	Donations under \$25.00 during this reporting period.		\$40.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1,040.00	
TOTAL (if last page of this schedule)				\$ 4,915.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/03/08	ID# CK#	John M. Hand 2307 - 5th St. Emmetsburg, IA 50536	Campaign Treasurer. \$50 a month for 12 months.	\$ 600.00
01/04/08	ID# CK#	Council of State Governments 701 E. 22nd St., Ste 110 Lombard, IL 60148	Registration for legislative seminar in Traverse City, Michigan	300.00
01/04/08	ID# CK#	HyVee Food Stores 4605 Fleuer Dr. Des Moines, IA 50321	Catered food for Fundraiser in Des Moines.	717.37
01/04/08	ID# CK#	E-Pride Office Supply 918 Broadway, Ste. 2 Emmetsburg, IA 50536	Office Supplies for Campaign purposes.	141.27
01/04/08	ID# CK#	Algona Upper Des Moines 14 E. Nebraska Algona, IA 50511	1 year subscription	52.00
02/02/08	ID# CK#	The Ruthven Zipcode P.O. 327 Ruthven, IA 51358	1 year subscription	23.00
02/02/08	ID# CK#	The Graettinger Times P.O. Box 118 Graettinger, IA 51342	1 year subscription	23.00
02/02/08	ID# CK#	Estherville Daily News 107 St. No. Estherville, IA 51334	1 year subscription	69.00
SUB-TOTAL				\$ 1,925.64
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
02/02/08	ID# CK#	Swea City Herald-Press 319 3 N Swea City, IA 50590	1 year subscription	\$ 28.50
02/02/08	ID# CK#	Pocahontas Record Democrat 218 N. Main St. Pocahontas, IA 50574	1 year subscription	27.50
02/02/08	ID# CK#	John P. Kibbie P.O. Box 190 Emmetsburg, IA 50536	Reimbursement for flight to St. Louis for legislative Ag meeting on January 19th & 20th.	249.45
02/02/08	ID# CK#	Bancroft Register 103 W. Ramsey Bancroft, IA 50517	1 year subscription	28.50
02/16/08	ID# CK#	Fort Dodge Messenger 713 Central Ave. Fort Dodge, IA 50501	1 year subscription	159.60
02/16/08	ID# CK#	Humboldt Independent P.O. Box 157 Humboldt, IA 50548	1 year subscription	42.00
03/01/08	ID# CK#	West Bend Journal P.O. Box 47 West Bend, IA 50597	1 year subscription	25.00
03/14/08	ID# CK#	Titonka Topic 147 Main St. N Titonka, IA 50480	1 year subscription	22.00
SUB-TOTAL				\$ 582.55
TOTAL (if last page of this schedule)				\$

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIBBIE FOR SENATE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04/11/08	ID# CK#	John P. Kibbie P.O. Box 190 Emmetsburg, IA 50536	2006 Campaign miles @ .34 per mile. 8616 miles. Complete itemization in file.	\$ 2,929.44.
04/11/08	ID# CK#	John P. Kibbie P.O. Box 190 Emmetsburg, IA 50536	2007 Campaign miles @ .485 per mile. 4040 miles. Complete itemization in file.	1,959.40
04/11/08	ID# CK#	John P. Kibbie P.O. Box 190 Emmetsburg, IA 50536	Incurred expenses on legislative trip to Traverse City, MI. 8-25-07.	1,228.95
04/16/08	ID# CK#	Iowa Democratic Party 5661 Fleur Dr Des Moines, IA 50321	Political Contribution	18,000.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 24,117.79
TOTAL (if last page of this schedule)				\$ 26,625.98

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
KIBBIE FOR SENATE

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
02/22/08	Iowa Senate Majority Fund 5661 Fleur Dr. Des Moines, IA 50321		Tyson Group- Auto Call	\$ 629.80	<input type="checkbox"/>
02/22/08	Iowa Senate Majority Fund 5661 Fleur Dr. Des Moines, IA 50321		Strategic Media, LTD Mail Piece #1	4,559.17	<input type="checkbox"/>
03/07/08	Iowa Senate Majority Fund 5661 Fleur Dr. Des Moines, IA 50321		Strategic Media, LTD Mail Piece #2	4,338.57	<input type="checkbox"/>
04/17/08	Iowa Senate Majority Fund 5661 Fleur Dr. Des Moines, IA 50321		Strategic Media, LTD Mail Piece #3	4,561.49	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (If last page of this schedule)				\$	14,089.03

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)